

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	65607	7/11/00
O.I.P.E. CLASSIFIER		823	7-1-00
FORMALITY REVIEW	de		8/1/00
RESPONSE FORMALITY REVIEW	2A	50553	11/29/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/11/00
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9	✓	✓	7/11/00
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17	✓	✓	7/11/00
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24	✓	✓	7/11/00
25	✓	✓	7/11/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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